JUN 292012

CB-CC-0234

FCC Mail Room

I am writing today to provide supplemental information to my petition CB-CC-0234. The context of the supplement is the inclusion of my 2012 Tax returns. This information illustrates Closed Captioning would be detrimental to my business. The tax return included is solely based on the income and expense as it relates to the Coldwell Banker Real Estate Show. I am also affirming that the prior information in my original petition is accurate and current.

Jay Huseby
Dpi Production Company
State of Wisconsin County of Marathon
BEFORE ME, the undersigned Notary,
before whom affidavit is swom], on this 14th day of June, 2012, personally appeared Jay Huseby], known to me to be a credible person and of lawful age, who being by me first duly sworn, on [his or her] oath, deposes and says: The statements and information contained in this letter are true and accurate signature of affiant)
Jay Huseby [typed name of affiant]
Subscribed and sworn to before me, this [day of month] day of [Notary Seal:]

My Commission Expires Ward 13, 2013

CB-CC 0234

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

Department of the Treasury Internal Revenue Service (99) ▶For information on Schedule C and its instructions, go to www.irs.gov/schedulec ▶ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074 Attachment Sequence No. 09

Name o	f proprietor					S	ociaj	SECUE		ber 199	7
Jay	D Huseby					1					
A	Principal business or profession, including product or service (see instructions)					B Enter code from instructions					
	Video Editing					L					00
С	Business name. If no separate		s name, leave blank.								(see instr.)
-	dpi Production Cor		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				4	: 1	8 7	7/9	5 2
E	Business address (including s										
	City, town or post office, state										
F		Cash			Other (specify)					⊠ Yes	□No
G Li	• • • •		•	_	2011? If "No," see instructions for						□.,,
H					n(s) 1099? (see instructions)					└─ ☐ Yes	⊠ No
.1	• • • •		• •		in(s) 1099? (see instructions)					☐ Yes	□No
Part		an requ	10010111810331	····		<u> </u>					<u> </u>
1a	Merchant card and third party	paymer	its. For 2011, enter -0-		1a	0.		Τ			
b	Gross receipts or sales not en										
C	Income reported to you on Fo		•								
_	that form was checked. Cautio				10						
ď	Total gross receipts. Add line	es 1a thr	ough 1c			$\overline{\cdot}$	1d			72	,326.
2	Returns and allowances plus	any othe	r adjustments (see instruc	tions)		. [2				
3	Subtract line 2 from line 1d .					. [3			72	,326.
4	Cost of goods sold (from line					. [4			32	,806.
5	Gross profit. Subtract line 4	from line	3			. [5			39	,520.
6	Other income, including feder	al and st	ate gasoline or fuel tax cre	edit or	refund (see instructions)	. [6				
_ 7		nd 6 .			<u> </u>		7			39	,520.
Part	I Expenses		Enter expenses for	or bus	siness use of your home only	on	line	30.			
8	Advertising	8	2,307.	18	Office expense (see instructions)		18				
9	Car and truck expenses (see			19	Pension and profit-sharing plans	.	19				
	instructions)	9	6,458.	20	Rent or lease (see instructions):						
10	Commissions and fees .	10		a	Vehicles, machinery, and equipme	nt	20a	 			
11	Contract labor (see instructions)	11		b	Other business property		20b	╀			
12	Depletion	12		21	Repairs and maintenance	1	21				,489.
13	Depreciation and section 179 expense deduction (not	1 1		22	Supplies (not included in Part III)		22			2	,837.
	included in Part III) (see			23	Taxes and licenses	, t	23	├			25.
	instructions)	13		24	Travel, meals, and entertainment	:					
14	Employee benefit programs			a	Travel	.	24a	├			
45	(other than on line 19).	14		b	Deductible meals and						
15	Insurance (other than health)	15		٠.	entertainment (see instructions)		24b	╁—			,315.
16	Interest:	100		25 26	Utilities	\cdot	25 26	┼			,313.
a b	Mortgage (paid to banks, etc.)	16a		27a	Wages (less employment credits	' ·	27a	┼			
17	Other	17		-/a			27b	 			
28			ousiness use of home. Add		8 through 27a		28	╁	····	17	,431.
29	Tentative profit or (loss). Subt				-		29	†			,089.
30	, , ,				eport such expenses elsewhere .		30	_			1003.
31	Net profit or (loss). Subtract	•						 			
	If a profit, enter on both Form			ine 131	and on Schedule SE. line 2.	Į					
	If you entered an amount on lin				·		31			22	,089.
	• If a loss, you must go to lin		,)	٠					/
32	If you have a loss, check the t		describes your investment	t in this	s activity (see instructions).						
	If you checked 32a, enter to		•		· · · · · · · · · · · · · · · · · · ·						
	on Schedule SE, line 2. If y			-			32a				s at risk.
	Estates and trusts, enter on F			•	· · · · · · · · · · · · · · · · · · ·		32b	-		nvestme	ent is not
	• If you checked 32h, you mi	u st attac	h Form 6198. Your loss m	av be	limited)			a	t risk.		

Schedu	e C (Form 1040) 2011			Page 2
Part	Cost of Goods Sold (see instructions)			
33	Method(s) used to	- 0		
34	value closing inventory: a \boxtimes Cost b \square Lower of cost or market c \square Was there any change in determining quantities, costs, or valuations between opening and closing inventors.	_	er (attach explan	
	If "Yes," attach explanation		. Tyes	⊠ No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35		0.
36	Purchases less cost of items withdrawn for personal use	36		32,806.
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		32,806.
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4	42		32,806.
Part	Information on Your Vehicle. Complete this part only if you are claiming car of and are not required to file Form 4562 for this business. See the instructions for file Form 4562.			
44 a	Of the total number of miles you drove your vehicle during 2011, enter the number of miles you used your Business 12,220 b Commuting (see instructions) c	vehick Other		0
	Was your vehicle available for personal use during off-duty hours?			
45				
46	Do you (or your spouse) have another vehicle available for personal use?			∐ No
47a	Do you have evidence to support your deduction?	• •		☐ No
ь Part	If "Yes," is the evidence written?		🛛 Yes	☐ No
	Care Expended List below business expenses not included on integer 20 or		Í	
				, <u></u>
				<u></u>
				·
	Total other expenses. Enter here and on line 27s			